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PTO/SB/97 (08-00)

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Application Number: 09/7543,055

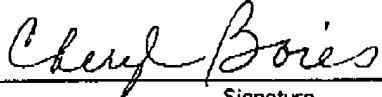
Filing Date: 4/5/2000

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Date



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Fee Transmittal

Response to Office Action dated 4/25/2005 (36 pages)

Total pages transmitted: 38

571-273-8300

Attorney Docket No: MS1-514US

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4819).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$0.00)

Complete if Known

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JUL 26 2005

Application Number	09/543,055
Filing Date	4/5/2000
First Named Inventor	Gopal Parupudi
Examiner Name	KLINGER, SCOTT M
Art Unit	2153
Attorney Docket No.	MS1 -514US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$)	Small Entity
50	25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x 50	=	

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x 200	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other:

Fee Paid (\$)

SUBMITTED BY

Signature

Registration No. 38605
(Attorney/Agent)

Telephone (509) 324-9256

Name (Print/Type): Lance R. Sadler

Date 7/25/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUL 25 2005

1 Application Serial No. 09/543,055
2 Filing Date April 5, 2000
3 Inventorship Parupudi et al.
4 Applicant Microsoft Corp.
5 Group Art Unit 2153
6 Examiner Klinger
7 Attorney's Docket No. ms1-514
Title: "Context Translation Methods and Systems"

RESPONSE TO OFFICE ACTION DATED APRIL 25, 2005

8 To: Commissioner for Patents
9 P.O. Box 1450
10 Alexandria, VA 22313-1450
11 From: Lance Sadler (Tel. 509-324-9256, ext 226; Fax 509-323-8979)
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